

# The Louisiana Level Of Care Eligibility Tool



A Learning Module Presented  
by:  
The Office of Aging and Adult  
Services (OAAS)

# The LOCET

The Level of Care Eligibility Tool (LOCET) is an automated, scientifically developed and research-based screening tool utilized in Louisiana for determining Nursing Facility Level of Care eligibility for long-term care programs

# The LOCET Process

The LOCET was implemented effective December 1, 2006, for long term care programs requiring a nursing facility Level of Care determination

# Important Notice

- Anyone applying for admission into a nursing facility must be approved by OAAS and/or the appropriate LEVEL II authority, OBH or OCDD prior to the date of admission.

# Definition of Terms

It is critical that individuals working with the LOCET have a working knowledge and understanding of the various terms used to describe and define the items in each section of the LOCET



# Working Vocabulary Review

Please take a few moments to review and familiarize yourself with the LOCET terms and definitions on the following slides...



# Caregiver

A person who gives care for an individual. An informal caregiver does not receive payment for the care received. A paid (formal) caregiver receives monetary compensation for the services rendered. If a caregiver spends any of his/her time giving care as an unpaid, informal caregiver, this person should be considered an “informal” caregiver.

# Degree of Difficulty Questions

An additional set of questions that are asked in the ADL Pathway Section of the LOCET for individuals who respond that they completed an ADL “Independently” during the specified 7-day look-back period. This takes in to consideration individual who live alone and may not have had the benefit of “human assistance” during the look-back period, yet have difficulty in completing those ADLs.

# Delusions

Fixed, false beliefs not shared by others that the applicant holds even when there is obvious proof or evidence to the contrary (e.g., belief that he or she is terminally ill; belief that spouse is having an affair; belief that food is poisoned)

# Extensive Assistance

Assistance involving weight-bearing which was provided 3 or more times in look-back period

# Guided Maneuvering

Assistance by physical guidance of limbs. This is non-weight-bearing which was provided 3 or more times in a look-back period

# Hallucinations

False perceptions that occur in the absence of any real stimuli. An hallucination may be **auditory** (e.g., hearing voices), **visual** (e.g., seeing people, animals), **tactile** (e.g., feeling bugs crawling over skin), **olfactory** (e.g., smelling poisonous fumes), or **gustatory** (e.g., having strange tastes)

# Hemodialysis

A method of removing unwanted byproducts from the blood of clients with renal insufficiency or renal failure through the use of a machine (dialyzer)

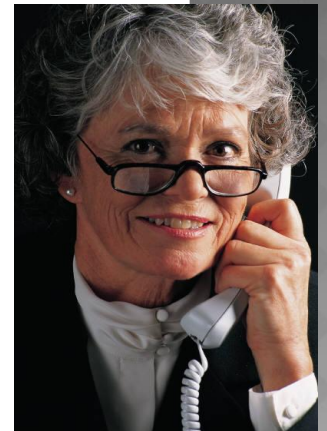
# Hospital

A facility that operates 24 hours a day, seven days a week to provide diagnosis, treatment and care of persons who are suffering from illness, injury, infirmity or deformity or other physical or mental condition for which medical, surgical and/or obstetrical services would be available and appropriate, and who may be admitted for emergency or overnight stay or longer

# Informant

The informant is the person who supplies information to the intake analyst for the LOCET.

The informant and the personal representative may or may not be the same person. It is important to determine the relationship of the informant with the applicant.



# Initial Targeting Criteria (ITC)

The ITC questions section of the LOCET (last section of the LOCET) is designed to capture individuals who have a:

- caregiver who is 70 years or older;
- disabled caregiver or
- A combination of conditions that place him/her at risk of nursing home placement within 120 days

# Initial Targeting Criteria (ITC) (CONTINUED)

- Applicants seeking LT-PCS services must initially meet ITC as a programmatic condition for participation in that program
- ITC is not required for accessing nursing home, Wavier, or PACE services and therefore, will not be covered in this presentation

# Intake Analyst

Specially trained personnel who administer LOCET to applicants or their informant(s)



# Limited Assistance

Assistance of non-weight bearing nature 3 or more times in look-back period

# LOCET

The Louisiana Level of Care Eligibility Tool is a scientifically developed and research-based evaluation tool which is utilized in the determination of nursing facility Level of Care eligibility for entry to long-term programs

# OPTS LOCET Hardcopy Form

- Contains LOCET Sections
- Posted on OAAS' Website:  
[www.oaas.dhh.louisiana.gov](http://www.oaas.dhh.louisiana.gov)

The screenshot shows a web browser window displaying the 'OPTS LOCET Hardcopy' form. The browser's address bar shows the URL 'http://new.dhh.louisiana.gov/assets/docs/OAAS/publications/L...'. The form itself is titled 'OPTS LOCET Hardcopy' and 'Page 1 of 12'. It includes fields for 'Participant Name' and 'Completed by:'. Below these are two rows of information: 'LOCET Initiated by: Circle Answer: DHH Designee' and 'Applicant Informant', followed by 'Date LOCET Initiated:' and 'Time LOCET Initiated:'. A table with two columns, 'Initial' and 'Audit Review', is also present. The form contains several sections of text, including 'Setting the Stage Mark Answer:', '1. The telephone specialist will discuss the medical eligibility determination process/issuues generally with the informant, then read the statement to the informant and ask if he/she understands, clarify any misunderstandings, and finally select the answer given.', and '5. Relationship of informant to applicant (select only one):'. The relationship options are: Self, Spouse, Child or Child-in-law, Other Relative - Include any relative who is not a child or child-in-law, or a current spouse, Non-Relative Who is Not Captured in Above Categories, Other Health Care Professional - Social Worker or Case Manager who is not captured in above categories or other health professional, and Qualified Hospital Representative. The form also includes a statement about the purpose of the interview and a section for 'The following issues have been explained to me:' with two options, A and B.

**OPTS LOCET Hardcopy**  
Page 1 of 12

Participant Name \_\_\_\_\_ Completed by: \_\_\_\_\_

LOCET Initiated by: <b>Circle Answer:</b> DHH Designee	Applicant Informant
Date LOCET Initiated:	Time LOCET Initiated:
Type of LOCET: Initial Audit Review	

**Setting the Stage Mark Answer:**  
1. The telephone specialist will discuss the medical eligibility determination process/issuues generally with the informant, then read the statement to the informant and ask if he/she understands, clarify any misunderstandings, and finally select the answer given.

"I (informant) understand that the purpose of this interview is to determine if the person being assessed (applicant) meets medical eligibility criteria for publicly-funded long-term care services, and that I am expected to provide objective and accurate information about the applicant to assist in this determination."

The following issues have been explained to me:  
A. The information I provide during this interview verified for quality improvement purposes  
B. The information I provide will be used to determine medical eligibility for long-term care

5. Relationship of informant to applicant (select only one):  
☐ Self  
☐ Spouse  
☐ Child or Child-in-law  
☐ Other Relative - Include any relative who is not a child or child-in-law, or a current spouse.  
☐ Non-Relative Who is Not Captured in Above Categories  
☐ Other Health Care Professional - Social Worker or Case Manager who is not captured in above categories or other health professional  
☐ Qualified Hospital Representative

# LOCET Status

An assignment of a disposition of the LOCET. The automated LOCET system assigns the status automatically to a completed LOCET.

# Important Notice:

An “approved” status in LOCET does not replace the need to meet all Program Requirements for the applicant’s chosen Program(s)

# Look-back period

A period of time in which a LOCET item is evaluated. The length of the look-back period being evaluated is noted for each item in the LOCET. The first day of the look-back period is the day the LOCET is being administered, “looking back” for the prescribed number of days (24 hours a day) noted for each particular LOCET item.

# OAAS

Stands for the Office of Aging and Adult Services. The OAAS is the state agency responsible for operating and overseeing Nursing Facility Admissions and Long Term Care Home and Community-Based Services in the state of Louisiana

# Nursing Facility

A facility that operates 24 hours a day serving two or more persons who are not related by blood or marriage to the operator and which provides maintenance, personal care, or nursing for persons who, by reason of illness or physical infirmity or age, are unable to properly care for themselves

# OPTS

Stands for Office of Aging and  
Adult Services Participant  
Tracking System and is the OAAS  
database that houses the LOCET

# Parenteral Feedings

Introduction of a nutritional substance into the body by intravenous (I.V.) means

# Pathways

Avenues of eligibility which identify a set of criteria for meeting Louisiana's Nursing Facility Level of Care

# Peritoneal Dialysis

A method used to remove wastes and water from the blood of clients with renal insufficiency or renal failure using the peritoneal membrane as a natural semipermeable membrane. Wastes and excess water move from the blood, across the peritoneal membrane, and into a special dialysis solution, called dialysate, in the abdominal cavity which has a composition similar to the fluid portion of blood

# Point of Entry Contractor

An entity designated by OAAS to serve as the access point for Long Term Care Services administered by OAAS

# Responsible Representative

An individual who represents the interests of the applicant who is capable of self-direction; accompanies, assists, represents the applicant in the program evaluation process; may not be the paid provider of services for the applicant

# Weight -bearing support

Holding weight of one or both lower limbs, trunk. Can also include holding weight of arms.

# *General Medicaid Terms*

# Adult Day Health Care (ADHC) Waiver Program

A waiver service which provides direct care for the physically and/or mentally impaired. It provides a pre-determined number of hours per day of oversight for the individual in a licensed day care center.

# *Community Choices Waiver Program*

A Medicaid Home and Community-based service waiver providing alternative services to eligible individuals who choose to remain in their home and community

# *Long Term Personal Care Service (LT -PCS)*

A State Plan program which offers assistance to eligible Medicaid recipients who choose to remain in their home and community

# ***Nursing Facility Services***

Long term care services provided for maintenance, personal care or nursing care for persons who, by reason of illness or physical infirmity or age, are unable to properly care for themselves

# Program of All-Inclusive Care for the Elderly (PACE)

Offers pre-paid, capitated, comprehensive health care services in a specific geographic area. Designed to assist elders 55 and older to live in their homes.

## ***PACE (continued)***

- Coordinates and provides all needed preventive, primary, acute and long term care services.
- All services must be covered services, including physician, hospital care, and nursing facility services.

# ***Program Requirements***

- Must be met for eligibility in any program;
- Vary from program to program

# *Program Requirements -- Examples*

## *CCW Waiver Program*

- *Must be able to ensure health and safety*

## *LT PCS State Plan Program*

- *Must need at least “limited level” of assistance with an Activity of Daily Living*
- *Must meet Initial Targeting Criteria (ITC)*

## *Nursing Facility Care*

- *Must meet PASARR requirements as stated in the Code of Federal Regulations (CFR)*

# The LOCET Process

- ◉ Communication is key to an accurate assessment process.
- ◉ Care must be taken to assure the best manner of communication is made between the intake analyst and the informant.

# The LOCET Process (continued)

- ◉ Intake Analyst will always obtain information from all available sources
- ◉ Code the BEST answer from ALL available information sources



# The LOCET Interview

- ◉ Some rephrasing of questions may be needed to assure effective communication
- ◉ remain on target with the question
- ◉ obtain a clear picture of the applicant's abilities

# The LOCET Interview (continued)

- ◉ Select vocabulary appropriate for upper elementary level of education
- ◉ Do not ask leading questions, ask clear and objective questions
- ◉ Use all available sources of information to best answer each item

# LOCET Pathways



# Activities of Daily Living (ADL) Pathway

# ADL Pathway

Identifies individuals with a significant loss of independent function in performing ADLs

# ADL Pathway (continued)

The individual's performance, including the type of **human assistance** (if any) actually **received** during the 7-day look-back period is what is captured when coding each of the items listed in the ADL Section of the LOCET

# ADL Pathway (continued)

Each of the ADL performance codes is exclusive; there is no overlap between codes

## ADL Pathway (continued)

Changing from one ADL performance code to another demands an increase or decrease in the number of times help was provided during the 7-day look-back period

# LOCET ADL Section Items

- 1. *Locomotion*
- 2. *Eating*
- 3. *Transfer*
- 4. *Bed Mobility*
- 5. *Toilet Use*
- 6. *Dressing*
- 7. *Personal Hygiene*
- 8. *Bathing*

# LOCET ADL Section Coding Options

# Coding LOCET ADLs

- The LOCET Intake Analyst will use the following coding criteria when coding ADL LOCET Items 1 through 8

# Independent

Make this selection if the applicant received no help or oversight, OR help or oversight was provided only 1 or 2 times in the last 7 days

# ADL Degree of Difficulty Questions (DDQs)

If an individual/informant answers any of the LOCET ADL Section questions as “Independent”, the LOCET Intake Analyst will ask the following question:

1. Do you have trouble with (insert ADL name here)? Yes No (Go on to item 2)

2. If the answer is yes, answer this question:  
How hard is it for you to do?

- ☐ I have a little difficulty
- ☐ I have a lot of difficulty

# Supervision

Make this selection if the applicant required oversight, encouragement or cueing 3 or more times during the last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days

# Limited Assistance

Make this selection if the applicant is highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR additional help was provided only 1 or 2 times during last 7 days

# Extensive Assistance

Make this selection when the applicant performed part of activity over last 7-day period, and help of the following type(s) was provided 3 or more times:

- ✓ Weight-bearing support
- ✓ Full performance by another individual during part, but not all, of last 7 days

# Total Dependence

Make this selection if the applicant required full performance of activity by another individual during entire 7-day period (Total Dependence means the applicant was totally dependent on others for the entire 7-day look back period, 24 hours a day)

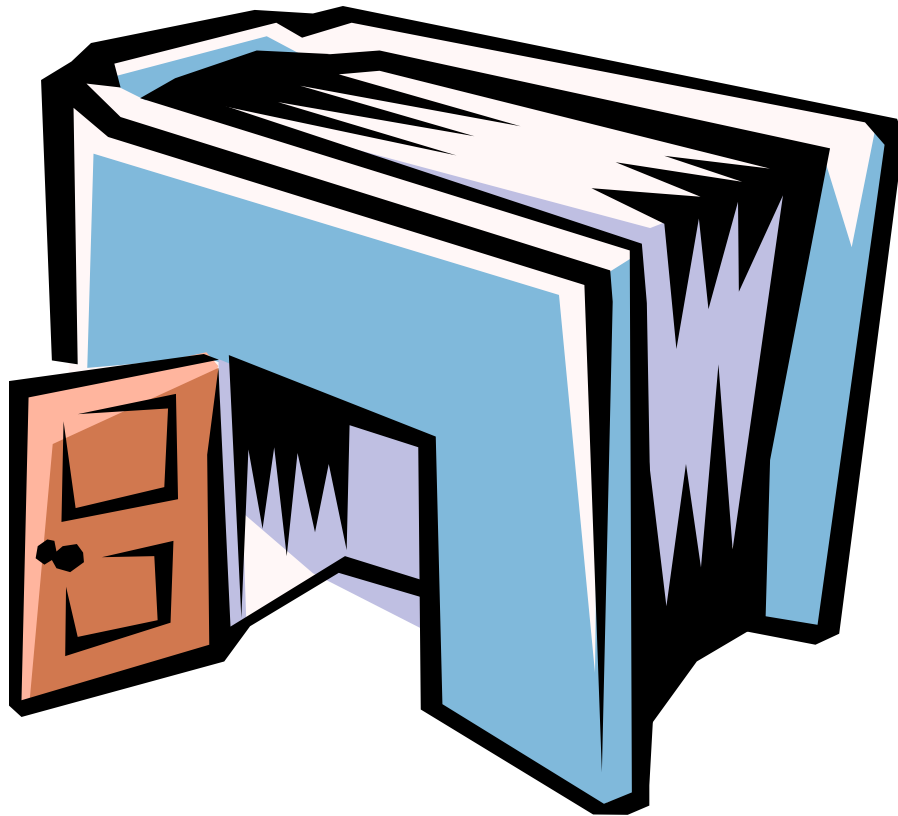
# Activity Did Not Occur

Make this selection if the ADL activity did not occur during the entire 7-day look-back period (regardless of ability)

# Unknown to Informant

- Select Unknown only if all sources of information have been exhausted

# LOCET ADL Section Items Defined



# Locomotion ADL

- Describes how the applicant moved between locations inside his/her place of residence during the last 7-day look-back period;

# Locomotion ADL (continued)

- If the applicant uses a wheelchair, the informant will focus on the 7-day look-back period, and how the applicant performed the act of locomotion (as described in the previous slide) once he/she was in the wheelchair (e.g., did applicant propel him/herself once in the W/C?)

# Coding Locomotion ADL

- The Intake Analyst will code this ADL item on the LOCET based on the information provided by the informant, and the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period

# Eating ADL

- Describes how the applicant performed the act of eating and drinking (regardless of skill) during the 7-day look-back period
- Includes intake of nourishment by other means, e.g., tube feeding

# Eating ADL (continued)

- The Informant is asked to focus on the last 7-days and to describe how the applicant performed the eating ADL

# Eating ADL (continued)

- This item does not include the act of meal preparation, and therefore, the informant must not consider the applicant's ability to prepare the meal when describing how the applicant performed the Eating ADL during the 7-day look-back period

# Coding the Eating ADL

- The Intake Analyst will code this ADL item based on the information provided by the informant, the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period, and his/her best clinical judgment.

# Transfer ADL

Describes how the applicant moved to and from surfaces during the 7-day look-back period. For example, from the bed to a chair, or from a chair to sofa, or from a wheelchair to a standing position.

# Transfer ADL (continued)

- Excludes transferring to/from bath/toilet
- Describes how the applicant performed this ADL during the 7-day look-back period

# Coding the Transfer ADL

- The Intake Analyst will code this ADL item on the LOCET based on the information provided by the informant, the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period, and his/her best clinical judgment

# Bed Mobility ADL

- Describes how the applicant moved to and from a lying position, turned side to side, and positioned body while in bed during the 7 day look-back period

# Bed Mobility ADL (continued)

- The Informant will focus on how the applicant performed the Bed Mobility ADL during the 7 day look-back period. For example, did the applicant use a trapeze bar, or other assistive device to maneuver him/herself once in the bed? Did some one assist the applicant to pull up in the bed by providing weight-bearing assistance?

# Coding the Bed Mobility ADL

- The Intake Analyst will code this ADL item on the LOCET based on the information provided by the informant, the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period, and his/her best clinical judgment

# Toilet Use ADL

- Describes how the applicant used the toilet (or commode, bedpan, urinal) during the 7 day look-back period

## Toilet Use ADL (continued)

- Includes transfer on/off toilet, cleaning self, changing pad, managing ostomy or catheter, adjusting clothes

# Coding the Toilet Use ADL

- The Intake Analyst will code this ADL item on the LOCET based on the information provided by the informant, the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period, and his/her best clinical judgment

# Dressing ADL

- Describes how the applicant dressed and undressed him/herself, including prostheses, orthotics, fasteners, belts, shoes, and underwear during the 7 day look-back period

# Coding Dressing ADL

- The Intake Analyst will code this ADL item on the LOCET based on the information provided by the informant, and the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period

# Personal Hygiene ADL

- Describes how the applicant grooms him/herself during the 7 day look-back period, including combing hair, brushing teeth, washing/drying face/hands, shaving. (EXCLUDE baths and showers)

# Coding Personal Hygiene ADL

- The Intake Analyst will code this ADL item on the LOCET based on the information provided by the informant, and the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period

# Bathing ADL

Describes how the applicant took a full-body bath during the 7 day look-back period.  
(exclude hair washing or washing of back)

# Coding Bathing ADL

- The Intake Analyst will code this ADL item on the LOCET based on the information provided by the informant, and the coding definition that best describes the applicant's actual self-performance during the 7-day look-back period

# Cognitive Performance Pathway

# LOCET Cognitive Performance Section

- Uses Cognitive Performance Scale to identify applicants with cognitive difficulties

# Cognitive Performance (continued)

- Focus is on the applicant's actual performance in areas such as the ability to remember recent events, daily decision-making skills, and his/her ability to be understood by others

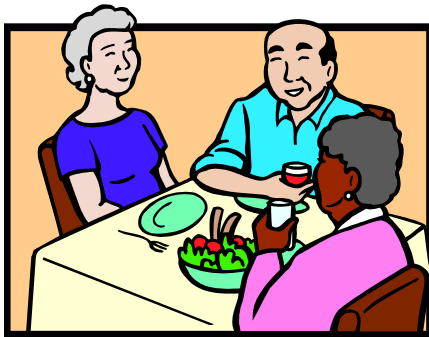
# Cognitive Performance (continued)

- Determines the applicant's self-assessment of his/her functional capacity to remember recent events (i.e., short term memory)

# Cognitive Performance

## Short Term Memory Item

- Does the applicant appear to recall recent events, for instance, when he/she ate his/her last meal, what he/she ate took, or when he/she took the last medication dose?



# Coding Cognitive Performance Short Term Memory

- If the applicant appear to recall recent events, the Intake Analyst will code this item as - **Memory OK**

# Coding Cognitive Performance Short Term Memory (continued)

- If the applicant cannot recall recent events, the Intake Analyst will code this item as - **Memory Problem**

# Coding Cognitive Performance Short Term Memory (continued)

- The **Unknown to Informant** option should only be selected when the Intake Analyst has exhausted all available sources of information and determines that this coding option is the only applicable choice

# LOCET Cognitive Skills for Daily Decision Making Item

- This LOCET item focuses on how the applicant makes decisions about the tasks of daily life, such as planning how to spend his/her day, choosing what to wear, reliably using canes/ walkers or other assistive equipment if needed

# **Cognitive Skills for Daily Decision Making Coding Options**

# Independent

- Make this selection if the applicant's decisions were consistent and reasonable (reflecting lifestyle, culture, values); the applicant organized daily routine and made decisions in a consistent, reasonable, and organized fashion

# Minimally Impaired

- Make this selection if the applicant has some difficulty in new situations, his/her decisions are poor, or when the applicant requires cueing/supervision in specific situations only

# Moderately Impaired

- Make this selection if the applicant decisions were poor; or, the applicant required reminders, cues, and supervision in planning, organizing, and conducting tasks of daily life

# Severely Impaired

- Make this selection if the applicant's decision-making was severely impaired; the applicant never (or rarely) made decisions

# Making Self Understood

- This LOCET item focuses on how clearly the applicant is able to express or communicate his/her needs or requests. (Includes speech, writing, sign language, or word boards)

# Making Self Understood (continued)

- Focus is on the applicant's ability to express or communicate requests, needs, opinions, urgent problems, and social conversation
- Observe and listen to the applicant's efforts to communicate with you

# **Cognitive Performance**

## **Making Self Understood**

### **Coding Options**

# Understood

- Make this selection if the applicant expresses ideas clearly and without difficulty

# Usually Understood

- Make this selection if the applicant has difficulty finding the right words or finishing thoughts, resulting in delayed responses. If given time, little or no prompting is required.

# Sometimes Understood

- Make this selection if the applicant has limited ability, but is able to express concrete requests for at least basic needs (i.e., food, drink, sleep, toilet)

# Rarely/Never Understood

- Make this selection if at best understanding is limited to interpretation of highly individual, applicant-specific sounds or body language (e.g., indicates the presence of pain or need to toilet by making grunting noises)

# Behavior Pathway

# Behavior Pathway

- Identifies applicants who displayed repetitive behavioral challenges such as wandering, verbally or physically abusive, socially inappropriate behaviors within the 7- day look-back period



# Behavior Pathway (continued)

- Focus is on the number of days in which the behaviors are exhibited, not individual episodes. For instance, if the applicant had three episodes of wandering on one day of the 7-day look-back period, that would count for one day of wandering.

# LOCET Behavior Section Items

# Wandering

- Describes applicants who move about (in- or out-of-doors) with no discernible, rational purpose.
- May be oblivious to their physical or safety needs.

# Wandering (continued)

- Should be differentiated from purposeful movement (e.g., a hungry applicant moving about the apartment in search of food)
- Does not include pacing behavior

# Wandering (continued)

- Should be differentiated from purposeful movement (e.g., a hungry applicant moving about the apartment in search of food)
- May be by walking or by wheelchair and may occur in or out of doors

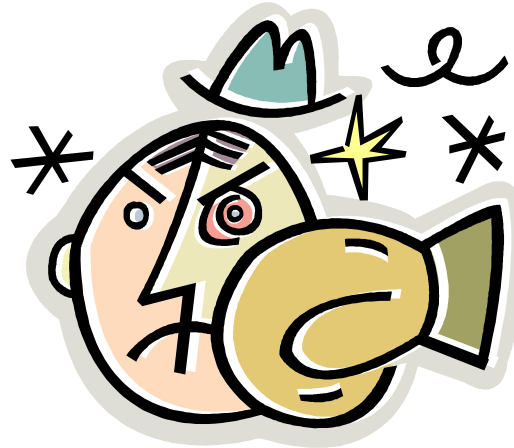
# Verbally Abusive Behavior

- Identifies applicants who threatened or screamed at others



# Physically Abusive Behavior

- Identifies applicants who hit, shoved, scratched or sexually abused others



# **Socially Inappropriate/Disruptive Behavior**

- Identifies applicants who made disruptive sounds, noisiness, or screaming;
- who performed self-abusive acts, inappropriate sexual behavior or disrobed in public;

# **Socially Inappropriate/Disruptive Behavior (continued)**

- Or who smeared or threw food / feces, or who hoarded or rummaged through others' belongings

# LOCET

## Behavior Section

### Coding Options

# Coding Options for Behaviors Described in Preceding Slides:

- Behavior not exhibited in last 7 days
- Behavior of this type occurred 1 to 3 days in last 7 days
- Behavior of this type occurred 4 to 6 days, but less than daily
- Behavior of this type occurred daily
- Unknown to Informant

# Mental Health Problems or Conditions

- Applicants who need long term care may experience delusions and hallucinations that impact their ability to live independently in the community.

# **Mental Health Problems or Conditions**

- Individuals applying for nursing home admission must also meet the PASARR requirements for nursing facility admission in accordance with state and federal rules and regulations

# Delusions Behavior LOCET Item

- Select “Yes” if the applicant experienced any delusions within the 7-day look-back period and answer the following question:
- Did the applicant’s delusions impact his/her ability to function in the community with the last 7 days? Yes, No, or Unknown

# Delusions Behavior LOCET Item

- Select **“No”** if the applicant did not experience any delusions within the last 7 days;
- Select **Unknown** only if all sources of information have been exhausted

# Hallucinations Behavior LOCET Item

- Select “Yes” if the applicant experienced any hallucinations within the 7-day look-back period and answer the following question:
- Did the applicant’s delusions impact his/her ability to function in the community with the last 7 days?

Yes, No, or Unknown

# Hallucinations Behavior LOCET Item

- Select **“No”** if the applicant did not experience any hallucinations within the last 7 days;
- Select **Unknown** only if all sources of information have been exhausted

# Service Dependency Pathway

# Service Dependency Pathway

- This Pathway focuses on applicants who were enrolled in and receiving services from either the Waiver, Long Term Personal Care Services (LT-PCS) program, PACE program or a Medicaid reimbursed nursing facility as of 12/01/06

# Service Dependency Pathway (continued)

- The applicant qualifying under this Pathway is eligible for continued enrollment and delivery of services from these programs

# Service Dependency LOCET Items

- Is the applicant currently receiving services from Community Choices Waiver, ADHC Waiver, PACE, LT-PCS, or are they a resident of a nursing facility? **Yes No**
- If the answer is **Yes**, answer this question: Has the applicant been receiving these services since before 12/1/06 with no break in service and requires these services to maintain current functional status?  
**Yes No**

# Physician Involvement; Treatments and Conditions; and Rehabilitative Therapies Pathways

- These pathways identify applicants who have acute or unstable medical or rehabilitative conditions which meet level of care requirements.
- Applicants who qualify in these Pathways are likely to have potential for improvement in their condition.

# Physician Involvement Pathway

# Physician Involvement Pathway

- Focus on information concerning the frequency of health care practitioner examinations and order changes for the applicant.

Visits and orders from physician assistants, nurse practitioners, or clinical nurse specialists working in collaboration with the physician should be included.

# Physician Involvement Pathway

- Focus on information concerning the frequency of health care practitioner examinations and order changes for the applicant within the 14-day look-back period

Visits and orders from physician assistants, nurse practitioners, or clinical nurse specialists working in collaboration with the physician should be included.

# Physician Involvement Pathway

- Visits and orders from physician assistants, nurse practitioners, or clinical nurse specialists working in collaboration with the physician are included when responding to this LOCET item

# Physician Involvement Pathway

- Physician orders include written, telephoned, faxed, or consultation orders for new or altered treatments in the community setting;
- Drug renewal orders are not to be considered



# Physician Involvement LOCET Items

- **Physician visits:** In the last 14 days, how many days has a physician (or authorized assistant or practitioner) examined the applicant?
  - Do not count emergency room examinations;
  - Do not count in-patient hospital examinations;
  - May enter up to 15 days

# Physician Involvement LOCET Items

## Physician Orders:

In the last 14 days, how many times has a physician (or authorized assistant or practitioner) changed the applicant's orders?

- Do not include order renewals without change;
- Do not count hospital in-patient order changes;
- May enter up to 15 order changes (Number of times the physician changed the applicant's orders within the last 14 days)

# Physician Involvement LOCET Items

- Physician Orders (continued)
  - Orders requesting a consultation by another physician may be counted; however, the order must be related to a possible new or altered treatment;

# Physician Involvement LOCET Items

- Physician Orders (continued)
  - Physician orders in the emergency room do count;
  - Do not count order changes which occurred prior to the last 14 days;
  - Operating within a sliding scale for insulin dosages is not counted as an order change;
  - If a different sliding scale is written, it does count for an order change.

# Sliding Scale Insulin Is Not Considered a Physician Order Change

- Zero Units for blood sugar less than 180
- 2 Units for blood sugar 181-240
- 4 Units for blood sugar 241-320
- 6 Units for blood sugar 321-400
- 8 Units for blood sugar greater than 401

# Treatment and Conditions Pathway

# Treatments and Conditions Pathway

- Designed to capture certain treatments and conditions which may be predictors of potential frailty or increased health risk

# Treatments and Conditions

- Applicants will not qualify under this Pathway when the conditions have been resolved, or they no longer affect functioning or the need for care;
- The individual look-back period for each item is noted for each item in this section of the LOCET



# LOCET Treatments and Conditions

## Section Items

Has the applicant received any of the following health treatments, or been diagnosed with any of the following health conditions?

**a:** Stage 3-4 Pressure Sores in the last 14 days?

- Yes No Unknown

**b:** IV Feedings in the last 7 days?

- Yes No Unknown

# Pathway : Treatments and Conditions (continued)

**c:** Intravenous Medications  
in last 14 days

- Yes No Unknown

**d:** Daily tracheostomy care,  
daily respirator/ventilator  
usage, daily suctioning in  
the last 14 days.

- Yes No Unknown

# Pathway : Treatments and Conditions (continued)

**e:** Pneumonia in the last 14  
days

- Yes No Unknown

# Pathway : Treatments and Conditions (continued)

- f: Daily respiratory therapy in last 14 days. Includes use of inhalers, heated nebulizers, postural drainage, deep breathing, aerosol treatments, and mechanical ventilation, etc., **which must be provided by a qualified professional.** Does not include hand held medication dispensers.
- **Yes No Unknown**

# Treatments and Conditions (continued)

- g:** Daily Insulin with two order changes in the last 14 days
- applicant received daily insulin injections with two or more order changes within the last 14 days.
  - Same parameters hold here for sliding scale dosages based on lab values.
  - Yes No Unknown

# Treatments and Conditions (continued)

## h: Peritoneal or Hemodialysis

- Applicant received peritoneal dialysis or hemodialysis in the last 14 days.

• Yes No Unknown

# Skilled Rehabilitation Therapies Pathway

# Skilled Rehabilitation Therapies Pathway

- Identifies the presence of rehab interventions based on ordered and scheduled therapy service (PT, OT, ST) needs during the last 7 days and scheduled therapies for the next 7 days.

# Skilled Rehab Therapies Received Coding

- Enter total number of minutes of the particular PT, OT, and/or ST Therapy received in the last 7 days. Do not include evaluation minutes in the total number of minutes.

# Skilled Rehab Therapies Scheduled Coding

- Enter total number of minutes of the particular PT, OT, ST Therapy scheduled in the next 7 days. Do not include evaluation minutes in the total number of minutes.

# Test Your Knowledge LOCET Coding Exercise



# Locomotion ADL

## LOCET Item #1.

During the 7 day look-back period, Mr. A ambulated independently around his home during the day. At night, Mr. A required his wife to walk by his side to provide oversight and verbal encouragement as he walked to the bathroom at least 3 times during the 7 day look-back period.

**CODE:**\_\_\_\_\_

# Eating ADL

## LOCET Item #2.

Mrs. B is fed by a feeding tube. No food or fluids are consumed through her mouth. Mrs. B's caregivers prepared and administered all feedings via her feeding tube during the 7 day look-back period. **CODE:**\_\_\_\_\_

# Transfer ADL LOCET Item #3.

Mrs. C was recently placed on total bed rest, and as a result, did not leave her bed during the entire 7 day look-back period.

**CODE:**\_\_\_\_\_

# Bed Mobility ADL

## LOCET Item #4.

Mr. D is slowly regaining his strength as a result of a recent surgery. Every day last week, Mr. D's caregiver provided weight-bearing assistance so Mr. D could sit up in his bed to eat all three of his daily meals.

**CODE:**\_\_\_\_\_

# Toilet Use ADL LOCET Item #5.

Mr. E's caregiver provided him with guided maneuvering assistance to get on and off the toilet at least 5 times during the 7 day look-back period.

**CODE:**\_\_\_\_\_

# Dressing ADL

## LOCET Item #6.

Ms. F's caregiver provided non-weight bearing assistance by guiding Ms. F's arms through the opening of her bra strap as she was getting dressed each morning during the 7 day look-back period.

**CODE:**\_\_\_\_\_

# Personal Hygiene

## LOCET Item #7.

Ms. G's caregiver provided verbal cueing 4 times during the 7 day look-back period to assist Ms. G in the completion of her morning hand and face washing, tooth brushing, and hair combing routine.

**CODE:**\_\_\_\_\_

# Bathing ADL

## LOCET Item #8.

Mr. H's caregiver provided weight-bearing assistance at least four times during the 7 day look-back period in order to assist Mr. H with getting in and out of the shower.

**CODE:**\_\_\_\_\_

## **Cognitive Skills for Daily Decision Making - LOCET Item #2.**

Mrs. C. manages her daily routine well if she is in her own home, but her daughter reports that she becomes very flustered and forgets to use her walker when she is out of her home.

**How would you code this item for Mrs. C? \_\_\_\_\_**

# Making Self Understood - LOCET Item #3.

Mr. D's daughter, Mary, has been his primary caregiver for the last 3 years. Mary reports that her father has been unable to speak for the last 2 years due to a stroke, but that he makes "grunting noises" when he wants food or drink. Mary reports that she is the only one who can understand what he wants. How would you Code Mr. D on this LOCET Item? \_\_\_\_\_

# Wandering Behavior - LOCET Item #1.

Mrs. Drew, the hospital discharge planner, reports that Mrs. J. was found in the hall one day this week. When asked what she needed, Mrs. J. reported that she “was very hungry and wanted something to eat”. How would you code this LOCET item for Mrs. J?

**Code:**

# Verbally Abusive Behavior

## - LOCET Item #2

Mrs. K's son reports that his mother sometimes yells at him and threatens to "run away from home", but that she has been pretty calm for the last 2 weeks with no such behavior. How would you code Mrs. K?

**Code:**

# Physically Abusive Behavior- LOCET Item #3.

Mrs. Drew, the hospital discharge planner, reports that Mr. L. shoved the Nurse's aide three times during yesterday's bath time. Mr. L has been in the hospital for the past 7 days with no other incidents of this nature occurring during that time. How would you code Mr. L on this LOCET Item?

## **Socially Inappropriate/Disruptive Behavior- LOCET Item # 4.**

Mrs. Drew, the hospital discharge planner, reports that Mrs. M. was found rummaging through her roommate's bedside stand on 2 different occasions this week. When asked what she was doing, Mrs. M. reported that she was "looking for some warm socks because she was cold." How would you code this LOCET item for Mrs. M? Code:\_\_\_\_\_

## **Mental Health Problems or Conditions - LOCET Item #5.**

Cathy, Mrs. M's daughter, stated that her mother "sometimes hears her mother calling to her". Mrs. M's mother has been deceased for many years. Mrs. M. is experiencing a "Delusion".

**True or False?**



# Physician Involvement - LOCET Item #1.

During the 14 day look back period, Mrs. A was examined in the emergency room by the ER doctor. On another day during the look back period, Mrs. A was examined by her primary care physician during a scheduled appointment. **How many days would you enter in LOCET item #1. Physician Visits?\_\_\_\_\_**

## Physician Orders - LOCET Item #2.

During the 14 day look period, Mr. B was admitted to the hospital where he stayed for 2 days. Over the course of his stay, the physicians wrote a total of 7 new orders for his care. Mr. B had no other order changes during the 14 day look back period. **How many order changes would you enter for this LOCET item #2.?**\_\_\_\_\_

# Physician Orders - LOCET

## Item #2

Mr. C is an insulin dependent diabetic. On day 8 of the 14 day look back period, Mr. C's physician wrote a new order to discontinue his daily dosage of 4 units of Regular Insulin and prescribed a Sliding Insulin Scale instead. **This would be counted as a one (1) order change in LOCET item #2. True or False?**

# Treatments and Conditions - LOCET Item #1. e.

During the 14 day look back period, Mrs. A was diagnosed and treated for Pneumonia which is now resolved. Mrs. A. has no associated ADL/IADL needs at this time. How would you CODE this item?

No

Yes

Unknown



# Skilled Rehabilitation Therapies - LOCET Items a. & b.

Mr. A. received physical therapy for 60 minutes on three of the seven look-back days. On one of those days, Mr. A received a 45 minute physical therapy evaluation. He also received 10 minutes of speech therapy (ST) during this period. Mr. A is scheduled to receive physical therapy (PT) for 60 minutes on 3 of the next 7 days. Enter the correct # of minutes for each of the appropriate columns below:

- |                              |           |           |
|------------------------------|-----------|-----------|
| 1. Speech Therapy (ST)       | a = _____ | b = _____ |
| 2. Occupational Therapy (OT) | a = _____ | b = _____ |
| 3. Physical Therapy (PT)     | a = _____ | b = _____ |

  
**Last Week**

  
**Next Week**

Be Sure to Check the OAAS Website for  
LOCET Updates and other Important  
Information: [www.oaas.dhh.louisiana.gov](http://www.oaas.dhh.louisiana.gov)



# OAAS Email Contact Information

- [Carol.Denny@la.gov](mailto:Carol.Denny@la.gov)

**LOCET Trainer**

- [Mary.Perino@la.gov](mailto:Mary.Perino@la.gov)

**Nursing Facility  
Admissions/Process**

# Remember ...

- Informants and Intake Analyst will always obtain information from all available sources
- The Intake Analyst always select the LOCET code that best describes the applicants performance during the specified look-back period



# Test Your Knowledge Answer Key



# Locomotion ADL

## LOCET Item #1.

During the 7 day look-back period, Mr. A ambulated independently around his home during the day. At night, Mr. A required his wife to walk by his side to provide oversight and verbal encouragement as he walked to the bathroom at least 3 times during the 7 day look-back period.

**CODE: Supervision**



# Eating ADL

## LOCET Item #2.

Mrs. B is fed by a feeding tube. No food or fluids are consumed through her mouth. Mrs. B's caregivers prepared and administered all feedings via her feeding tube during the 7 day look-back period. **CODE: Total Dependence**



# Transfer ADL LOCET Item #3.

Mrs. C was recently placed on total bed rest, and as a result, did not leave her bed during the entire 7 day look-back period.

**CODE: Activity Did not Occur**



# Bed Mobility ADL

## LOCET Item #4.

Mr. D is slowly regaining his strength as a result of a recent surgery. Every day last week, Mr. D's caregiver provided weight-bearing assistance so Mr. D could sit up in his bed to eat all three of his daily meals.

**CODE: Extensive Assistance**

# Toilet Use ADL LOCET Item #5.

Mr. E's caregiver provided him with guided maneuvering assistance to get on and off the toilet at least 5 times during the 7 day look-back period.



**CODE: Limited Assistance**

# Dressing ADL

## LOCET Item #6.

Ms. F's caregiver provided non-weight bearing assistance by guiding Ms. F's arms through the opening of her bra strap as she was getting dressed each morning during the 7 day look-back period.

**CODE:** Limited Assistance

# Personal Hygiene

## LOCET Item #7.

Ms. G's caregiver provided verbal cueing 4 times during the 7 day look-back period to assist Ms. G in the completion of her morning hand and face washing, tooth brushing, and hair combing routine.

**CODE: Supervision**

# Bathing ADL

## LOCET Item #8.

Mr. H's caregiver provided weight-bearing assistance at least four times during the 7 day look-back period in order to assist Mr. H with getting in and out of the shower.

**CODE:** Extensive Assistance

# Cognitive Skills for Daily Decision Making - LOCET Item #2.

Mrs. C. manages her daily routine well if she is in her own home, but her daughter reports that she becomes very flustered and forgets to use her walker when she is out of her home.



How would you code this item for Mrs. C? Minimally Impaired

# Making Self Understood - LOCET Item #3.

Mr. D's daughter, Mary, has been his primary caregiver for the last 3 years. Mary reports that her father has been unable to speak for the last 2 years due to a stroke, but that he makes "grunting noises" when he wants food or drink. Mary reports that she is the only one who can understand what he wants. How would you Code Mr. D on this LOCET Item? Rarely/Never Understood

# Wandering Behavior - LOCET Item #1.

Mrs. Drew, the hospital discharge planner, reports that Mrs. J. was found in the hall one day this week. When asked what she needed, Mrs. J. reported that she “was very hungry and wanted something to eat”. How would you code this LOCET item for Mrs. J?

Behavior not exhibited in last 7 days

# Verbally Abusive Behavior

## - LOCET Item #2

Mrs. K's son reports that his mother sometimes yells at him and threatens to "run away from home", but that she has been pretty calm for the last 2 weeks with no such behavior. How would you code Mrs. K?

Behavior of this type occurred 1 to 3 days in last 7 days

# Physically Abusive Behavior- LOCET Item #3.

Mrs. Drew, the hospital discharge planner, reports that Mr. L. shoved the Nurse's aide three times during yesterday's bath time. Mr. L has been in the hospital for the past 7 days with no other incidents of this nature occurring during that time. How would you code Mr. L on this LOCET Item? Behavior of this type occurred 1 to 3 days in last 7 days

# **Socially Inappropriate/Disruptive Behavior- LOCET Item # 4.**

Mrs. Drew, the hospital discharge planner, reports that Mrs. M. was found rummaging through her roommate's bedside stand on 2 different occasions this week. When asked what she was doing, Mrs. M. reported that she was "looking for some warm socks because she was cold." How would you code this LOCET item for Mrs. M? **Behavior of this type occurred 1 to 3 days in last 7 days**

## Mental Health Problems or Conditions - LOCET Item #5.

Cathy, Mrs. M's daughter, stated that her mother "sometimes hears her mother calling to her". Mrs. M's mother has been deceased for many years. Mrs. M. is experiencing a "Delusion".

True or False?



# Physician Involvement - LOCET Item #1.

During the 14 day look back period, Mrs. A was examined in the emergency room by the ER doctor. On another day during the look back period, Mrs. A was examined by her primary care physician during a scheduled appointment. **How many days would you enter in LOCET item #1. Physician Visits? 1**

## Physician Orders - LOCET Item #2.

During the 14 day look period, Mr. B was admitted to the hospital where he stayed for 2 days. Over the course of his stay, the physicians wrote a total of 7 new orders for his care. Mr. B had no other order changes during the 14 day look back period. **How many order changes would you enter for this LOCET item #2.? 0**

# Physician Orders - LOCET

## Item #2

Mr. C is an insulin dependent diabetic. On day 8 of the 14 day look back period, Mr. C's physician wrote a new order to discontinue his daily dosage of 4 units of Regular Insulin and prescribed a Sliding Insulin Scale instead. **This would be counted as a one (1) order change in LOCET item #2.** **True or False?**

# Treatments and Conditions - LOCET Item #1. e.

During the 14 day look back period, Mrs. A was diagnosed and treated for Pneumonia which is now resolved. Mrs. A. has no associated ADL/IADL needs at this time. How would you CODE this item?

No



Yes

Unknown



# Skilled Rehabilitation Therapies - LOCET Items a. & b.

Mr. A. received physical therapy for 60 minutes on three of the seven look-back days. On one of those days, Mr. A received a 45 minute physical therapy evaluation. He also received 10 minutes of speech therapy (ST) during this period. Mr. A is scheduled to receive physical therapy (PT) for 60 minutes on 3 of the next 7 days. Enter the correct # of minutes for each of the appropriate columns below:

- |                              |                |                |
|------------------------------|----------------|----------------|
| 1. Speech Therapy (ST)       | a = <u>0</u>   | b = <u>0</u>   |
| 2. Occupational Therapy (OT) | a = <u>0</u>   | b = <u>0</u>   |
| 3. Physical Therapy (PT)     | a = <u>180</u> | b = <u>180</u> |
-  Last Week       Next Week